



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#4/A  
K DAVIS  
1-8-04

Appln No.: 10/006,461  
Applicants: Cathryn E. Goodman et al.  
Filed: December 6, 2001  
For: Method and Apparatus for  
Asperity Sensing and Storage  
TC/A.U.: 2623  
Examiner: Vikkram Bali

Confirmation No. 3518

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

12/30/03  
Date

Steven G. Parmelee  
Registration No. 28,790  
Attorney for Applicant(s)

Docket No.: CM01497I (72458)  
Customer No.: 22242

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JAN 06 2004

Technology Center 2600

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action mailed October 3, 2003 as entered in the above-captioned matter, the applicant respectfully submits the following amendment and response.

**Amendments to the Claims** are reflected in the listing of claims which begin on page 2 of this paper.

**Remarks/Arguments** begin on page 12 of this paper.



2623

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln No.: 10/006,461  
Filed: December 6, 2001  
Applicant(s): Cathryn E. Goodman et al.  
Title: Method and Apparatus for  
Asperity Sensing and Storage  
Art Unit: 2623  
Examiner: Vikkram Bali  
Attorney Docket No.: CM014971 (72458)  
Customer No.: 22242

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Attorney for Applicant(s)

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Mail Stop NON-FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment/reply in the above-identified application.

- ☐ An Appendix including amended drawing figures labeled as "Annotated Marked-up Drawings" is enclosed.
- ☒ No additional fee is required.

Fee Calculation For Claims As Amended

	As Amended	Previously Paid For	Present Extra	Rate	Additional Fee
Independent Claims	9	9	** = 0	x \$ 86.00	= \$ 0.00
Total Claims	51	51	* = 0	x \$ 18.00	= \$ 0.00
Fee for Multiply Dependent Claims				\$ 290.00	
** At least 3				Total Additional Fee	\$ 0.00
* At least 20					

- ☐ Applicant(s) assert entitlement to Small Entity Status (37 C.F.R. § 1.27), thus reducing the fee by half to: \$ 0.00
- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.

Application No. 10/006,461  
Amendment dated December 30, 2003  
Reply to Office Action of October 3, 2003

☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1135.

☒ The Director is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Director is authorized to charge the unpaid amount to Deposit Account No. 06-1135. A duplicate copy of this sheet is enclosed.

December 30, 2003

Date



Steven G. Parmelee  
Registration No. 28,790

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